



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
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THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Matsuura	Scott	A.	(808) 927-0619
MAILING ADDRESS (Street)			FAX
21 Hapua Place			(808) 244-6948
(City)	(State)	(Zip Code)	
Wailuku	Hawaii	96793	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
SPJ Consulting, LLC			(808) 927-0619
MAILING ADDRESS (Street)			FAX
45-248A Pahikaua Place			
(City)	(State)	(Zip Code)	
Kaneohe	Hawaii	96744	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
D.R. Horton - Schuler Homes, LLC		(808) 521-5661
MAILING ADDRESS (Street)		FAX
828 Fort Street Mall, 4 th Floor		(808) 538-1476
(City)	(State)	(Zip Code)
Honolulu	HI	96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Lona Herwig		(808) 521-5661
MAILING ADDRESS (Street)		FAX
828 Fort Street Mall, 4 th Floor		(808) 538-1476
(City)	(State)	(Zip Code)
Honolulu	HI	96813

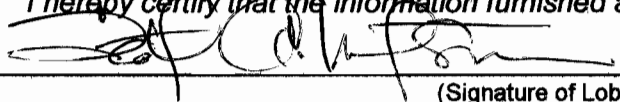
RECEIVED BY U.S. MAIL

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	<input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

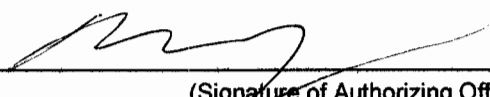


(Signature of Lobbyist)

3-18-06

(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Michael T. Jones		Division President	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
D.R. Horton - Schuler Homes, LLC		(808) 521-5661	
MAILING ADDRESS (Street)		FAX	
828 Fort Street Mall, 4 th Floor		(808) 538-1476	
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
		3/27/06	
(Signature of Authorizing Officer or Person Represented)		(Date)	